

September 22, 2009

The Honorable Tom Harkin  
Chairman  
Subcommittee on Labor, HHS, Education  
and Related Agencies  
Committee on Appropriations  
Washington, DC 20510

The Honorable Thad Cochran  
Ranking Member  
Subcommittee on Labor, HHS,  
Education and Related Agencies  
Committee on Appropriations  
Washington, DC 20510

The Honorable David Obey  
Chairman  
Subcommittee on Labor, HHS, Education  
and Related Agencies  
Committee on Appropriations  
Washington, DC 20515

The Honorable Todd Tiahrt  
Ranking Member  
Subcommittee on Labor, HHS,  
and Related Agencies  
Committee on Appropriations  
Washington, DC 20515

Dear Chairman Harkin, Ranking Member Cochran, Chairman Obey, and Ranking Member Tiahrt:

As you confer on the FY 2010 Labor-HHS-Education Appropriation bill, the undersigned organizations respectfully urge you to provide an additional \$15 million for the National Center on Health Statistics (NCHS) National Vital Statistics System to support states and territories as they implement the 2003 birth and death certificates and move toward electronic data collection. Additionally, we encourage you to adopt the FY 2010 House vital statistics report language halting any efforts at NCHS to limit the scope of birth and death data purchased from the states. While we greatly appreciate the \$14 million increase provided for NCHS in both the Senate and House versions of the appropriation bills, our organizations remain concerned that this funding is insufficient to sustain and modernize the National Vital Statistics System.

For more than a year, NCHS has been taking steps toward limiting the scope of data it obtains from states for the National Vital Statistics System. The plan is to create two categories of data--“core and enhanced”--with only core data purchased from every state and territory. For example, approximately 75 percent of data routinely used to monitor maternal and infant health (including prenatal care, smoking during pregnancy, medical risk factors, and educational attainment of parents) would be reclassified as “enhanced” and no longer collected or reported for all states and territories. If NCHS does not purchase this data from the states, the capacity of federal agencies as well as the research and policy community to review and analyze state and national health data will be undermined.

Ultimately, NCHS’ decision to no longer collect these data will potentially impact the ability of federal and state agencies to track health trends as they relate to reform as well as other national health priorities. NCHS plans to reprogram funds currently used for data acquisition to invest in the state and territories’ compliance with revisions of the U.S. Standard Certificate of Live Birth and U.S. Standard Certificate of Death approved

in 2003. Currently, only 60 percent of states and territories use the 2003 birth certificates and 56 percent have adopted the 2003 death certificate.

Providing \$15 million in additional funding specifically for the National Vital Statistics System would allow NCHS to help the remaining states and territories modernize their vital statistics infrastructure without undermining the scope and quality of data collected on a national basis.

At a time when both the new Administration and Members of Congress are moving forward on major reform of the health care system, the data collected by NCHS are needed more than ever to track and evaluate changes made.

In addition to the supplemental funding requested above, we urge you to adopt the strongest possible report language making clear that Congress considers it essential that NCHS continue to collect comprehensive data pertaining to the health and wellbeing of Americans residing in every state. By so doing, you will ensure that NCHS maintains its historic role as the premiere federal agency charged with collecting and analyzing vital statistics and that it has the resources needed to modernize its systems to increase data timeliness, efficiency, interoperability, and security.

Sincerely,

American Academy of Pediatrics  
Association of Maternal and Child Health Programs  
Association of Population Centers  
Association of State and Territorial Health Officials  
Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)  
Coalition for Health Services Research  
Consortium of Social Science Associations  
March of Dimes  
National Association for Public Health Statistics and Information Systems  
Population Association of America